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## \*BIBDATASHEET\*

CONFIRMATION NO. 4366

Bib Data Sheet

SERIAL NUMBER 09/808,742	FILING DATE 03/14/2001  RULE	CLASS 705	GROUP ART UNIT 3623	ATTORNEY DOCKET NO. 11273.12.1
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APPLICANTS

Gary Leeds, Rancho Santa Fe, CA; *YL*  
 Jordan Leeds, San Diego, CA;

\*\* CONTINUING DATA \*\*\*\*\*  
 This application is a CIP of 09/590,963 06/09/2000 ABN *YL*

\*\* FOREIGN APPLICATIONS \*\*\*\*\*  
*none YL*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED  
 \*\* 04/20/2001

Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY CA	SHEETS DRAWING 2	TOTAL CLAIMS 19	INDEPENDENT CLAIMS 3
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature	Initials		

ADDRESS  
 NEIL K. NYDEGGER  
 NYDEGGER & ASSOCIATES  
 348 OLIVE STREET  
 SAN DIEGO , CA  
 92103

TITLE  
 Method for prevention/rehabilitation customization

FILING FEE  RECEIVED 420	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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